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|--|-----------------|--------------|--|
| <b>Issue Classification</b><br> | Application No. | Applicant(s) |  |
|  | 09/678,529      | VEGA ET AL.  |  |
|  | Examiner        | Art Unit     |  |
|  | Sonny TRINH     | 2687         |  |

| ISSUE CLASSIFICATION  |                    |   |   |       |  |                                   |     |  |  |                        |                    |   |   |
|---|--------------------|---|---|-------|--|-----------------------------------|-----|--|--|------------------------|--------------------|---|---|
| ORIGINAL  |                    |   |   |       | CROSS REFERENCE(S)   |                                   |     |  |  |                        |                    |   |   |
| CLASS   | SUBCLASS           |   |   |       | CLASS  | SUBCLASS (ONE SUBCLASS PER BLOCK) |     |  |  |                        |                    |   |   |
| 455   | 41.1               |   |   |       | 455  | 572                               | 573 |  |  |                        |                    |   |   |
| INTERNATIONAL CLASSIFICATION  |                    |   |   |       |  |                                   |     |  |  |                        |                    |   |   |
| H   | 0                  | 4 | B | 05/00 |  |                                   |     |  |  |                        |                    |   |   |
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|   |                    |   |   | /     |  |                                   |     |  |  |                        |                    |   |   |
|   |                    |   |   |       | <div style="text-align: center;"> <br/> <b>SONNY TRINH</b><br/> <b>PRIMARY EXAMINER</b> </div>  |                                   |     |  |  |                        |                    |   |   |
| <div style="text-align: center;"> _____<br/> (Assistant Examiner) (Date) </div>   |                    |   |   |       | <div style="text-align: center;"> <br/> <b>SONNY TRINH</b><br/> <b>PRIMARY EXAMINER</b><br/> _____<br/> (Particular Examiner) (Date) </div> |                                   |     |  |  |                        |                    |   |   |
| <div style="text-align: center;"> <br/> <b>Kendra Bredis</b><br/> (Legal Instruments Examiner) (Date) </div> |                    |   |   |       | <div style="text-align: center;"> <b>Total Claims Allowed: 16</b><br/><br/> <table border="1"> <tr> <td>O.G.<br/>Print Claim(s)</td> <td>O.G.<br/>Print Fig.</td> </tr> <tr> <td>1</td> <td>1</td> </tr> </table> </div>     |                                   |     |  |  | O.G.<br>Print Claim(s) | O.G.<br>Print Fig. | 1 | 1 |
| O.G.<br>Print Claim(s)  | O.G.<br>Print Fig. |   |   |       |  |                                   |     |  |  |                        |                    |   |   |
| 1   | 1                  |   |   |       |  |                                   |     |  |  |                        |                    |   |   |

| <input type="checkbox"/> Claims renumbered in the same order as presented by applicant |          | <input type="checkbox"/> CPA |          | <input type="checkbox"/> T.D. |          | <input type="checkbox"/> R.1.47 |          |
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| Final  | Original | Final                        | Original | Final                         | Original | Final                           | Original |
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